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ABSTRACT

This chapter on inclusion of students with disabilities in general education is based on the following assumptions: students with disabilities should have the opportunity to participate in general education classes and activities with their nondisabled peers; supports can be provided that will enable all children in those settings to be successful; inclusive strategies enhance learning for all students; and students' special needs need not dominate teaching time. The chapter examines what is meant by "inclusion"; outlines benefits of inclusive programs for students with disabilities, typical students, and school staff; and notes potential pitfalls. Six steps in implementing inclusive aprograms are discussed: (1) form a representative planning group; (2) engage in consensual "visionizing"; (3) assess needs and determine priorities; (4) form school-level planning teams; (5) form individual student planning teams; and (6) implement recommended changes. Techniques are presented for addressing challenges that schools face during the implementation of inclusion. These challenges concern modifications in school organization, identifying and providing supports, modifications in teachers' roles, meaningful participation, inclusion across different age groups, community-based instructional programs, and integration of related services. The final section discusses how inclusive programs can be evaluated. Appendices list six videotapes on inclusion and other materials available from the Virginia Statewide Systems Change Project. (Contains approximately 65 references.) (JDD)

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Chapter 8

Including and Supporting Students with Disabilities within General Education

Martha E. Snell and Rachel Janney

INTRODUCTION

Although federal law has required since 1975 that students with disabilities be placed in the least restrictive environment (LRE) (i.e., the least restrictive educational setting) as possible, states are highly varied in their records regarding integrating students with their nondisabled peers (Danielson & Bellamy, 1989). Statements in the original law mandating educational programs for students with disabilities (Public Law 94-142), which are now included in the Individuals with Disabilities Education Act of 1990 (IDEA), directed public schools to ensure that

> **To the maximum extent appropriate, handicapped children**, including children in public or private institutions or other care facilities, **are educated with children who are not handicapped**, and that **special classes, separate schooling, or other removal of handicapped children from regular educational environment occurs only when the nature or severity of the handicap is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily**. (20 U.S.C. 1415 [5][B])

Simply stated, current special education law requires that all students with disabilities be educated alongside typical, nondisabled peers to the greatest degree possible. Any move to place a student away from the regular educational setting must occur only when it is not possible for that student's program, as supported with services, accommodations, and aides, to provide him or her with an appropriate education (Snell & Eichner, 1989). Unfortunately, school systems have tended to interpret this LRE clause less often as an integration mandate and more often as permission to provide a "cascade of services" or a continuum of placements whose restrictiveness and separation increased according to a student's disability label and the system's familiarity with appropriate intervention (Lipsky & Gartner, 1989; Taylor, 1988). Despite this history, the "burden of proof" lies with the school system "to justify any placement other than a regular classroom for a child with a disability" (Salisbury & Smith, 1991, p. 25).

The position taken in this chapter reflects the following assumptions:

- Students with disabilities should have the opportunity to participate in general education classes and activities with their nondisabled peers.

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- Supports can be provided that will enable all children in those settings to be successful.

- Strategies that allow the inclusion of students with a wide range of abilities in general education classrooms enhance learning for all students.

- The special needs of class members with disabilities need not dominate teaching time and can enable typical peers to have positive social and learning experiences within a more diverse peer group.

The purpose of this chapter is to provide administrators with an understanding of effective practices that will lead to meaningful integration or inclusion of students with disabilities. It is organized around the following frequently asked questions about inclusion:

1. **What is inclusion?**

2. **Why move to inclusive school programs?**

3. **What steps can school staff take to move to inclusive programs?**

4. **What challenges do schools face during the implementation of inclusion and how can these be addressed?**

5. **How can the effects of inclusive programs be evaluated?**

1. WHAT IS INCLUSION?

Inclusive schools are those in which all students belong, individual differences are valued, and all students are supported in meeting their educational needs. To achieve an inclusive school, staff provide individualized special education services and other needed supports within the context of general education, rather than relying on "pull-out" programs. Inclusive schools serve the children in their neighborhoods, including any children identified as having a disability. Inclusive schools typically operate within school systems that have developed policies supporting these practices on a system-wide basis, although the practices may still be evolving throughout these school systems.

Inclusion does not mean eliminating the support or assistance that children need to be successful learners; it does mean eliminating special education as a separate system or as practice of equating special supports and services with a special school or classroom where students must go to have their educational needs met. Inclusion does not mean trying to fit students with special needs into the mainstream; instead, it means creating a mainstream where everyone fits.

In an inclusive school, the educational programs for students with disabilities are still individually designed by the students' special educational team, but this is done in a manner that maximizes their contact with peers and enables their accomplishment of IEP goals and objectives. Although students with extensive support needs (e.g., students with severe disabilities) may sometimes require instruction in functional goals in natural contexts outside the classroom, accomplishing these goals does not necessarily require isolation from typical peers (Sailor, 1989; Snell, 1991). Many students besides those with identified disabilities learn best from hands-on activities undertaken in age-appropriate, community-referenced learning environments. Thus, when it becomes important for students with more intensive needs -- particularly those who have reached middle school and high school age -- to receive instruction that can only be provided outside the classroom (e.g., mobility instruction around the school, community-based instruction, and vocational instruction), such instruction will be provided. However, it may include nondisabled peers whose learning needs and interests also dictate that they have opportunities to access such environments. When a school determines that it should provide the most successful learning experiences it can for all students, then classes become more active, teaching methods become more varied, and the resources and supports deployed become more flexible.

Following are several other terms pertaining to inclusive programs that should be defined:

- *Age appropriate*: Matched to the student's chronological age.
- *Natural proportions*: The number of individuals with a particular characteristic (e.g., severe mental retardation, blindness, learning disabilities) that would be expected for a given geographical region or age group.
- *Segregation*: The exclusion of students with disabilities from social and/or academic school activities with their peers by placement in a separate building, annex, trailer, or hallway where only students with special needs are present or by assignment to a separate, self-contained classroom that is isolated either physically and/or by scheduled activities.
- *Integration*: The mixing of students with disabilities with nondisabled students for various school or extracurricular activities.
- *Mainstreaming*: Placing students who typically have mild disabilities into social activities or academic classes with students who do not have disabilities.

Note that while the distinction between integration and mainstreaming is less clear and these terms overlap with the term *inclusion*, these practices may not involve nondisabled peers, may not occur at the student's neighborhood school, and may not include the provision of individualized supports to accommodate the student's special needs. Also important is the concept of natural proportions of students with

disabilities. When special education programs involve "clustered classrooms," busing students away from their neighborhood schools or districts, or placing them in residential schools, then the population of students in a given school or district will *not* reflect natural proportions. They may be either reduced or excessive. Placing students in their neighborhood school or the school they normally would attend regardless of disability contributes to the preservation of natural proportion.

2. WHY MOVE TO INCLUSIVE SCHOOL PROGRAMS?

The rationale for including students with disabilities with the necessary supports in general education classes alongside their nondisabled peers can be viewed from the perspectives of (a) the student with disabilities, (b) peers without disabilities and the school community, and (c) school staff. A combination of research, school statistics, and informal observation in inclusive programs undergirds the rationale for such change (e.g., Gartner & Lipsky, 1987; Kluwin, Moores, & Gaustad, 1992; Lipsky & Gartner, 1989; Stainback, Stainback, & Forest, 1989).

Benefits for Students with Disabilities

The following is a list of frequently cited benefits for students with disabilities who are included with their nondisabled peers in general education classes and school activities:

- Probably the most often cited benefit is the possibility that natural peer supports and friendships will develop in inclusive programs. Conversely, without regular interactions between these groups of students, there is no possibility for natural peer supports or friendships to develop during school hours.

- Inclusive programs provide students who have disabilities with age-appropriate, typical role models who can have a positive influence on their communication ability, dress, social interaction, behavior, motivation for learning academic skills, and self-concept.

- Inclusive programs fulfill the basic need everyone has to belong (Kunc, 1992), which in Maslow's hierarchy of needs serves as a building block for self-esteem and self-actualization.

- For students with an inability to respond due to limited communication skills or motor limitations, inclusive settings contribute to improvements in awareness of the environment, alertness to others, appropriate behavior, and happiness.

- Inclusive programs provide a more realistic, normalized context for learning than do segregated school programs. This means that the skills students learn

are more likely to be skills needed and used during school and transferred to everyday situations outside of school.

Benefits for Typical Students and the School Community

Typical students and others in the school community also may experience benefits from inclusive programs such as the following:

- For students, educators, parents, and peers, improved expectations for and attitudes toward students with disabilities (Giangreco, Dennis, Cloninger, Edelman, & Schattman, 1993; Janney, Snell, Beers, & Raynes, 1992; York, Vandercook, Macdonald, Heise-Neff, & Caughey, 1992b).

- For future parents of children with disabilities, enhanced competence in parenting due to being better informed and having a positive base of experience.

- For future taxpayers and voters, enriched capability to address legislation influencing persons with disabilities in a sensible and nonprejudiced manner.

- For society at large, an increased appreciation of human diversity and individual differences in achievement that manifests itself through improvements in

  (1) Social cognition.
  (2) Increased tolerance of others.
  (3) Reduced fear of differences.
  (4) Development of personal values and principles.
  (5) Friendships and interpersonal acceptance.
  (6) Self-concept (Peck, Donaldson, & Pezzoli, 1990).

Benefits for School Staff

Several recent studies (Giangreco et al., 1993; Janney et al., 1992; York et al., 1992b) have identified benefits for school staff who have positive experiences with students with disabilities, including the following:

- Increased motivation to interact with such students, and learn the skills needed to teach them, resulting in an increased feeling of "ownership" of these students.

- A willingness to collaborate with and learn from their own typical students.

- An interest in active and participatory approaches that encourage students to learn cooperatively.

- Increased expectations for learning and recognition of the potential in all students.

Potential Pitfalls

Because inclusive schools pose many changes in the way special education services currently are provided to students with disabilities, some concerns have been voiced in the literature. These include

- Increased parental concern over their children's acceptance by others (Lord, Varzos, Behrman, Wicks, & Wicks, 1990).
- Loneliness of students with disabilities (Lord et al., 1990).
- General education and special education teachers who are unwilling and/or uncertain about how to accommodate students with identified disabilities in the mainstream (Glomb & Morgan, 1991; Myles & Simpson, 1989; Semmel, Abernathy, Butera, & Lestar, 1991).
- The loss of needed services for children with disabilities and/or for nondisabled children (Semmel et al., 1991).

What is common to these concerns is fear of the unknown. The best antidotes to fears related to inclusion are careful and informed planning; preparation of staff, students, and parents; and positive experiences (Stainback, Stainback, Moravec, & Jackson, 1992).

Many authors have warned that high-quality inclusive programs cannot be mandated or created without the contributions of teachers, administrators, and parents. Activities that build consensus between staff and parents, provide needed information and technical assistance, and reflect the successful experience of other school systems will reduce the pitfalls.

3. WHAT STEPS CAN SCHOOL STAFF TAKE TO MOVE TO INCLUSIVE PROGRAMS?

Most veteran teachers and administrators are used to separate, pull-out special education programs and may not have the philosophical basis, vision, or technical training to implement inclusive programs. Therefore, it is not surprising that "some states [and school systems] have been more successful than others in providing services in regular settings that were seen as appropriate by local decision makers" (Danielson & Bellamy, 1989, p. 452). Given this history, it is important that we "Don't confuse 'I don't know how to do it' with 'It's not a good idea'" (Kunc, 1991).

Inclusive school programs have the following critical elements in common:

- Division-and building-level consensus on what integration means and commitment to pursue that vision.
- Ongoing collaboration and problem solving among educators, support staff, parents, and students.
- Curricular and instructional strategies that weave individual goals and objectives into general educational activities.
- Provision of adequate time for collaboration.
- Strong administrative support along with proactive and committed leadership.
- Parental involvement.
- Strong peer networks and other natural supports.

Change proceeds through the typical stages of planning, initiation in model or pilot schools, increased implementation, formalized policy, and widespread implementation. Successful widespread implementation of inclusive school programs requires system-wide change. Without this level of change, inclusion efforts depend on temporary "teacher deals" (Biklen, 1985). These "deals" usually mean that special education teachers elect to arrange integration on a student-by-student basis with the general education teachers they know who will take students with disabilities in their classes. Such deals are time consuming to arrange and often temporary. By contrast, when school division policy supports inclusive programs, widespread implementation is possible, although it requires extensive effort. It is important to note that policies supporting inclusive school programs will affect other school policies such as those regarding teacher and related services staff roles and job descriptions, transportation, prereferral intervention, identification and placement procedures, location of school programs, and principal roles and site-based management (or shared decision making).

There is certainly no one way to achieve an inclusive school or school system. Given the vast array of existing special education program models and service delivery configurations, it would be impossible to prescribe here the specific next steps any one school system ought to take. However, successful efforts always require adequate planning and preparation as well as ongoing support for the implementation of effective practices. A systematic, coherent approach to a system-wide effort to move toward inclusive programs typically will include the following steps or components.

Step 1: Form a Representative Planning Group

A committee or task force that is representative of teachers and administrators in the school system, and the parents and community members who are its consumers should develop a plan to guide the system's change efforts. This advice holds true whenever schools wish to make significant changes in their programs (Sarason, 1990). Sarason (1990) has pointed out "how extraordinarily difficult it is to face the fact of intractability to change and our inability to consider alternatives. To be able to consider alternatives, one must first be dissatisfied with things as they are" (p. 110).

When educational stakeholders are requested by a school system's leaders to come together to identify problems and explore solutions, the outcomes of their planning are both richer and more likely to be accepted due to the investment made by the representative planning group (Villa & Thousand, 1992). As Kohn (1992) has noted, "It's not that people don't like to change; it's that they don't like to be changed."

Step 2: Engage In Consensual "Visionizing"

A crucial initial activity is to develop a forum for engaging all stakeholders in a process to create a mission statement. The mission statement should reflect the school system's purpose in terms of desired outcomes for students. For example,

> Every student can learn, and every student will learn, if presented with the right opportunity to do so. It is the purpose of school to invent learning opportunities for each student each day. . . Continuous improvement, persistent innovation, and a commitment to continuing growth should be expected of all people and all programs supported by school district resources, and school district resources should be committed to ensure that these expectations can be met. (Schlechty, 1990, pp. 131-132 as cited in Villa & Thousand, 1992, p. 122)

Creating a vision can be broadened to include implementation of a consensual process to delineate a long-term, holistic "master plan for improving all facets of school operation in order to produce excellent student achievement for all students" (Alessi, 1991, p. 15). Alessi (1991) has described such a process, the Outcomes-Driven Developmental Model (ODDM) developed by the Johnson City Central Schools in New York. One key element in ODDM is that participants work collaboratively using a decision-making process of continually asking and responding to four critical questions (about a school system):

- "What do we want" (for our schools)?
- "What do we know" (about our current school practices)?
- "What do we believe?"
- "What will we do" (to achieve our goals) (Alessi, 1991, p. 13)?

Having a dynamic relationship between central office staff (i.e., the school superintendent, the director of special education, transportation staff, etc.) and the stakeholder group or task force will broaden the realism of the group's planning and their resultant recommendations. For example, a change to neighborhood schools will affect bus routes and enrollment figures although it will have a lesser effect on space needs, since self-contained classrooms will not be encouraged as a model of service provision. Furthermore, this change will mean that some special education and related services staff will become itinerant, traveling between schools to serve students and interact with teachers. Special education administrators will need to advocate for state funding changes to support inclusive educational practices, since most state special education regulations have evolved around placement in self-contained classes as the basis for providing and calculating the costs of special education (Hamre-Nietupski, Nietupski, & Maurer, 1990). Reciprocal communication between the planners and the system's administrators will lead to plans that respond to the realities of a given school system.

Step 3: Assess Needs and Determine Priorities

The task force then can assess needs based on the two following perspectives: (a) the desired outcomes delineated through this consensual process, and (b) the implementation guidelines for inclusive programs listed later in this chapter. Many policy, personnel, inservice training, and programmatic needs will be identified. Several areas of need are likely to be addressed by task forces in most school systems. The task force must

- Determine priorities and timelines for moving students to home schools, as well as examine how bus routes and enrollment figures will be affected.

- In a systematic manner, prepare relevant special and general education staff for inclusion through inservice training activities, visits to inclusive school sites, and peer-to-peer exchanges. Inservice training needs commonly identified include skills for collaboration team problem solving and strategies to adapt instruction to individual learner needs. However, initial sessions tend to focus more on general concerns about what inclusion is and is not (e.g., it does not mean that special education services and supports will be discontinued, nor that all students will be expected to achieve the same objectives), an examination of the benefits of inclusion, and an examination of the ways that teachers' roles will change.

- Also in a systematic manner, prepare parents for inclusion. Possible activities include visiting local schools into which students with disabilities will be moving, visiting inclusive schools in other school systems, viewing videotapes of inclusive school programs such as "Regular Lives" (Biklen, 1988), and attending panel discussions with educators and other parents.

- Plan for the assignment of special education and related services staff to schools, while ensuring that they have adequate opportunities to consult and collaborate with classroom teachers. This change will often mean that some special education and related services staff become itinerant, traveling among schools to serve students and collaborate with their teachers.

- Develop and/or reallocate resources to ensure that each inclusive school program has adequate numbers of trained support staff and adequate and appropriate materials and equipment.

- Develop an evaluation plan.

Step 4: Form School-Level Planning Teams

Similar planning steps should take place at the school level under the leadership of the principal. No specific formula should be sought for improving a school's ability to meet the diverse needs of all of its students, although some common elements are often reported in the literature (Janney et al., 1992; Raynes, Snell, & Sailor, 1991; Sailor, Gee, & Karasoff, in press; Schattman, 1992; Snell, 1991; Villa & Thousand, 1992). Instead, teams of staff and parents, and at times students, are recruited to plan for the needed program elements and the steps an individual school will take toward implementing an inclusive program. It may be possible to use an existing collaborative team structure such as school-wide teacher assistance teams or grade-level/departmental teams to serve this planning function. Typically cited elements include the following:

- Development of a school policy/philosophy statement on integration and inclusion.

- Use of sensitization exercises as a part of planning so that staff and students become familiar in a positive way with disabilities and the specific students who will be included.

- Provision of ongoing access to knowledge and technical assistance.

- Principals who work with staff to make school modifications supportive of inclusive programs by

  (1) Revising class schedules so they allow teaming and support planning among teachers.

  (2) Adjusting class sizes.

  (3) Reconfiguring paraprofessional support and teacher assignment.

(4) Making adjustments in grading, year-end promotion, graduation, and award procedures.

(5) Granting teachers the needed flexibility and professional autonomy to convert their programs to inclusive programs.

- The ability to work in collaborative teams.
- Frequent and ongoing communication between general education teachers, special education teachers, and related services staff.
- Redistribution of a school's resources for serving students with diverse learning needs (i.e., Chapter I, remedial programs, special education) (Sailor, 1991).
- New and proven approaches to accommodating students with diverse learning characteristics into general education activities.
- Family involvement and contribution.
- Programs to develop peer support.
- Infusion of information about disability issues into general education curricula (e.g., integrating lessons about individual differences into the social studies or psychology curriculum instead of making them a separate unit on "disabilities") (Hamre-Nietupski, Ayres, Nietupski, Savage, Mitchell, & Bramman, 1989).
- Collaboration with community service agencies in an effort to provide more comprehensive supports, facilitate transition to postschool services, and coordinate efforts and planning with families.
- Use of volunteers in classrooms where students with disabilities are included.

Once inclusion has begun in a school, the planning team usually is left intact or reorganized to address the ongoing challenges that arise, examine barriers and potential solutions, and assess the status of inclusion.

Step 5: Form Individual Student Planning Teams

When support needs are less intensive (i.e., for students having mild or moderate disabilities), other collaborative team structures already in place in the school may be used to provide support for teachers and students. (For a discussion of these teams, refer to Chapter 14.) However, when students pose extraordinary challenges, schools form individual student planning teams to address those needs and support the teachers responsible for direct service. Some students who have intensive health care needs or extensive cognitive disabilities or who exhibit excessive problem behavior

may require the regular attention of an individual student planning team. These teams have the following characteristics:

- Primary team members include both the special education and general education teachers; the student's parent(s), guardian; or an involved family member; paraprofessionals; and in some cases peers. Additional members, including related services staff, the school nurse, the school counselor, a psychologist, other general education teachers, and the principal, may join regularly or periodically.

- Teams meet regularly, with the frequency of meetings depending on student need. In Vermont, individual student planning teams meet weekly at the beginning of the school year but may decrease the frequency of their meetings as progress is made.

- As with other collaborative teams, members engage in cooperative roles, have predetermined agendas, record meeting decisions, and identify activities and responsibilities of team members and others to address problem areas.

Step 6: Implement Recommended Changes

Attendance of students with exceptional learning needs in neighborhood schools and their inclusion in general education classes will likely require extensive changes in the social and organizational structures of a school system. For some schools, however, the changes may not be extensive. Recommended changes should evolve from the school system's efforts in planning through a representative task force. Some prevalent modifications include the following:

- Students with disabilities are physically present as part of their neighborhood school communities both socially and academically, which may mean changes in transportation, school assignment, class membership, individual schedules, and teacher ownership (Gerber & Semmel, 1984; Giangreco & Putnam, 1991).

- Pull out programs (e.g., special education, Chapter I compensatory programs, remedial programs, and therapy) are changed to in-class programs. Because pull-out programs often are criticized by educators (i.e., teachers and students have identified such programs as nonpreferred, socially stigmatizing, and leading to few long-lived academic gains), changes will be welcomed by many (Anderson & Pellicer, 1990; Giangreco, 1986; Jenkins & Heinen, 1989; Meyers, Gelzheiser, Yelick, & Gallagher, 1990). Successful modifications have included substituting substantially different programs that are integrated into the classroom and developed through the collaboration of general and special education teachers.

- Special education personnel fill consultative or collaborative roles rather than providing all special education services directly to students with disabilities (York, Giangreco, Vandercook, & Macdonald, 1992).

- Educators engage in collaborative teaming with a work schedule that supports this activity (Giangreco et al., 1993; Glomb & Morgan, 1991; York et al., 1992).

- Education staff work in teams with parents to define individualized supports for students with disabilities so they can succeed in general education. The concept of providing individualized support replaces the practice of classification and separation ("placement") for the receipt of special education services (Luckasson et al., in press; York et al., 1992).

- Strategies such as cooperative learning groups; individualized instruction; multilevel instruction; matrixing; and adaptation in curriculum, material, and response mode are learned and used by teachers to better accommodate the diverse needs of learners in inclusive classrooms (Putnam, Rynders, Johnson, & Johnson, 1989; Slavin, Madden, & Leavey, 1984).

School superintendents and principals need to accompany their understanding and support of these changes with approaches such as the following that are likely to facilitate change:

- Begin by studying successful examples of inclusion using visits to and videos of successful inclusion programs and horizontal interactions (parents from successful systems speaking to parents about the changes, administrators speaking to administrators, and teachers speaking to teachers). Appendix A lists appropriate videotapes.

- Provide staff and parents with a range of informational materials on inclusion. Appendix B lists some materials available in Virginia.

- Seek participation of all stakeholders in the process of defining the school's mission and philosophy on inclusion and identifying the needed changes and commitments of staff time and communication.

- Provide firm endorsement of changes developed by the team(s) of stakeholders and lend support to the ongoing evaluation of outcomes.

- Introduce changes gradually or incrementally with the needed time and resources.

- Localize change to part of the school program or to a subset of the school system's students and staff, rather than to the entire school system initially.

- Make use of a concerns-based approach to implementing change that involves ongoing assessment of concerns and responsive facilitation by teachers and administrators who understand inclusion (Hall & Hord, 1987; Hord, Rutherford, Huling-Austin, & Hall, 1987).

- Reduce conflict by providing increased planning time.

- Anticipate Murphy's Law ("if anything can go wrong it will") and support ongoing problem-solving teams at division and school levels (Bredo & Bredo, 1975; Evans, 1990; Sarason, 1990).

Be prepared for the process of change to inclusive programs to take time and be difficult. Many have noted that if school change occurs smoothly, it is likely to be superficial. Others have described an "implementation dip," or a period of little change following initial large, positive changes. Practitioners involved in the change process need ongoing administrative and peer support, and they also may need to be encouraged, pushed, and provided with time for processing the change that occurs.

4. WHAT CHALLENGES DO SCHOOLS FACE DURING THE IMPLEMENTATION OF INCLUSION, AND HOW CAN THESE BE ADDRESSED?

Like most other efforts to improve educational programs, inclusion poses some predictable challenges and obstacles. Many of the obstacles result from the concept of change itself; others result from the cooperative relationship that special educators must have with general educators to make inclusion work. Increased information and careful planning by the stakeholders, coupled with thoughtful implementation and evaluation, are likely to reduce the obstacles. Some of the frequent barriers that many school systems must confront are addressed next.

Modifications in School Organization

Reform in school organization has been debated by researchers, practitioners, and policy makers in both general and special education. School reform in general education has been directed toward reducing the numbers of students who are at risk for dropping out of school without the skills needed for basic employment. In special education, a major debate often referred to as the *regular education initiative (REI)* has focused on the narrower concept of the least restrictive environment for students with disabilities. Two predominant issues in this debate are (1) whether or not regular and special education should merge or stay separate and (2) whether students with disabilities should be returned to age-appropriate classes in general education with the needed supports or receive educational services primarily on a pull-out basis.

Discussion regarding school reform has infrequently included the issues identified in the REI, and, given the separate nature of special education, debate regarding the

REI has been focused primarily within the special education community. However, the issues are highly interrelated.

Skrtic (1991) has written about current school organization and its inability to support the changes required for successful inclusion and school reform. Like Sarason (1990), who has written about needed reforms in school culture, Skrtic has suggested that changes in school organization must be addressed first. Such restructuring changes will provide the foundation for other needed reforms.

Schools need to function as *adhocracies*-organizations whose members engage in active, collaborative problem solving to address the unique challenges students present as those challenges arise. In the adhocratic organization, teachers do not typically work alone, nor does the primary organization resemble a professional bureaucracy (the way teachers currently work), in which educators specialize by grade and/or subject or, as in special education, by disability area. In schools with an adhocratic organization it is assumed that (a) learning is highly complex, (b) experienced educators can pool talents, and (c) collaborative problem solving is the norm.

Thus, in reformed schools no one believes that standard classification of students and educators by specialty area with standard products and methods will meet the needs of even most students. In contrast to both machine bureaucracies (the way school administrations typically are organized) and professional bureaucracies (the way teachers are organized), in the adhocratic school environment teachers respect specialty areas but typically collaborate, mutually adjusting and reciprocally interacting to design novel products and services as solutions to educational problems.

A recent study of schools that had achieved various degrees of integration provided support for Skrtic's appeal for organizational change. Janney and colleagues (1992) found that the changes schools had made to integrate some students into mainstream activities, locations, and classes were "add-ons" -- changes that did not threaten the stability of the existing school organization. General education teachers who received the integrated students still worked primarily alone because the organizational changes needed to support collaborative teaming among school staff had not been made by principals, nor had teachers been taught to use or rely on collaboration among themselves. Likewise, few modifications had been made in the standard curriculum to include students academically, in part because the focus was primarily on social inclusion. Self-contained classrooms were retained when integration was partial, necessitating the maintenance by special education teachers of two models of service provision (manage self-contained classrooms and mainstream students), which meant little support for students in the mainstream. Despite the failure to make needed organizational changes, both teachers and school administrators often commented on the many positive changes brought about by integration.

Thus, perhaps the greatest challenge to schools seeking to include students with disabilities is the underlying need to tackle some aspects of basic organizational reform rather than simply make cosmetic changes that may either overload the existing system or fall short of lasting, meaningful change (McLaughlin & Warren, 1992). The changes that Sarason and Skrtic have suggested would seem to contribute to school quality far beyond the benefits of including students with disabilities.

Identifying and Providing Supports

Inclusion rests firmly on the assumption that diversity poses benefits for schools and for students. The traditional practice is to identify students with disabilities or delays, separate them into so-called "homogeneous groups," and provide standardized services to match their special educational labels. In inclusive programs, these practices are replaced with the approach of individually supporting students while they function as members of classes and take part in activities with their nondisabled peer group. Support can be defined as

> Resources and strategies that promote the interests and causes of individuals with or without disabilities; that enable them to access resources, information, and relationships inherent within integrated work and living environments; and that result in the person's enhanced interdependence, productivity, community integration, and satisfaction (Luckasson et al., 1992, p. 101).

What are the sources and functions of support? Teachers and paraprofessionals providing instruction exemplify one direct source and one function of support. *Supports must not, however, be equated with one-to-one adult assistance or teaching.* Luckasson and colleagues (in press) have described the following four sources of support:

- Individuals (e.g., their skills, competencies, ability to make choices).
- Other people (e.g., family, friends, co-workers, teachers, psychologists).
- Technology (e.g., assistive devices, job accommodations).
- Services (e.g., medical, vocational, behavioral).

These four sources provide supports that have one or more of the eight possible functions shown in Table 1 (Luckasson et al., 1992, p. 103).

As presented in Table 1, curriculum adaptation is support with the function of teaching, while environmental accommodations (e.g., elevators to the second floor of a school) and technological devices (e.g., motorized wheelchairs and electronic communication boards) serve the support function of facilitating school access and use. Natural sources of support, or those provided by peers, friends, and co-workers or through the individual's own initiative, without cost or "red tape" are preferable to paid supports because they are independent of school budgets and are unobtrusive.

Table 1. Support Functions

Supports	*Description*
1. Teaching	Advocating, instructing, adapting curriculum, collecting data, supervising, communicating, and providing feedback.
2. Befriending	Socializing, enjoying, sharing and confiding, and accompanying.
3. Financial planning	Advocating for benefits and coverage of services, adjusting work benefits and SSI-Medicaid, helping with money management, check cashing and budgeting, protection and legal assistance.
4. Employee assistance	Provision of counseling, crisis intervention, and assistance; assisting in job accommodation and redesign; enhancing job performance; supervisory training; and procurement of assistive technology devices.
5. Behavioral support	Functional analysis, antecedent strategies such as the manipulation of ecological and setting events and the provision of schedule and activity choices, teaching alternate adaptive responses, and building environments with effective consequences.
6. In-home living assistance	Personal maintenance and care, transfers and mobility, attendant care, housekeeping and homemaker services, dressing and clothing care, home health aides, medical alert devices, communication devices, and architectural modifications.
7. Community and school access and use	Car pooling and transportation programs, recreation and leisure involvement, transportation and pedestrian training; modification of vehicles, community use awareness and opportunities, and interfacing with generic agencies including schools, advocacy, and legal assistance.
8. Health assistance	Medical appointments, health supervision and interventions, counseling appointments and interventions, medication taking, hazards awareness, physical therapy, and mobility assistive devices.

Source: Adapted from Luckasson et al. (1992).

Individualized profiles of support are defined for students with disabilities and evaluated regularly by teams that include educators, parents, the students as appropriate, related services personnel, and infant or adult service agencies for students completing or entering a transition between programs. These individualized support profiles replace the service delivery model that relies on placing students into classrooms or services according to their disability label. Profiles of individualized supports evolve from assessment, as well as from collaborative teaming, ongoing interactions, and the problem solving that naturally occurs among teachers, parents, paraprofessionals, peers, and students. Some of these supports are listed in a student's IEP; others are requested or arranged by teachers, medical and social services, family members, the student or his or her peers.

Consistent with profiles of support is a special education placement or service delivery system that couples intensity of staff support with student need and asks "What staff and planning support is needed to support this student in a regular classroom setting?" Figure 1 illustrates an approach for matching services and supports to students with identified disabilities used in Franklin Northwest Supervisory Union, a school district in Vermont. Students with disabilities are provided with an increasing amount of support as needed to keep them performing successfully with their peers. For most students, then, the process traditionally referred to as *placement* is now more accurately termed *support* because students are not placed away from their peers but supported alongside them.

Modifications in Teachers' Roles

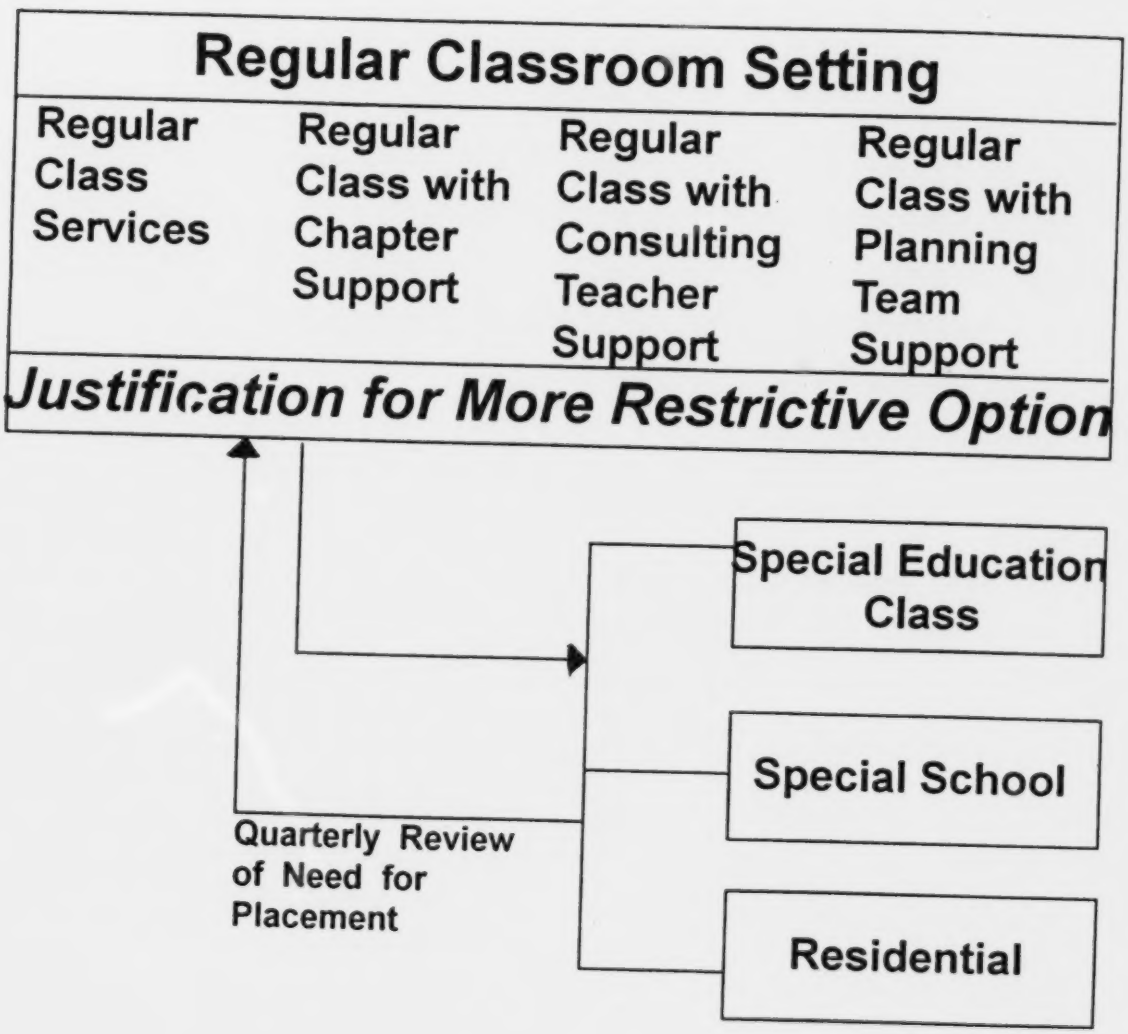
Successful inclusion requires that special and general education teachers collaborate as they provide support to students with disabilities. Working as a team, teachers blend their ideas and those of related services staff, the students' parents, typical peers, and paraprofessionals to

- Define what supports particular students need, who will provide them, and/or how they will be provided.
- Adapt general curriculum to suit students' needs and abilities.
- Modify teaching approaches and class activities as needed to include students in meaningful ways.
- Accommodate students physically.
- Evaluate student outcomes.
- Enhance understanding among all who interact with students who have disabilities and thus provide coherence to their educational experiences.

Figure 1

Continuum of Support Services Franklin Northwest Supervisory Union

After 1986


Regular Classroom Setting
Regular Class Services
Regular Class with Chapter Support
Regular Class with Consulting Teacher Support
Regular Class with Planning Team Support
Justification for More Restrictive Option
Special Education Class
Special School
Residential
Quarterly Review of Need for Placement

(The continuum of support services used after 1986 in the Franklin Northwest Supervisory Union, a school district in Vermont. (Reprinted with permission from R. Schattman [January, 1992]. Creating the complete school: Full inclusion the next step. A workshop at the School Leader's Institute on Inclusive Education, Virginia Statewide Systems Change Project, Charlottesville.)

The way a special education teacher elects to work in a school will depend on many factors, (including preferences of the general education teacher(s) in whose class the student is a member, student needs, agreed-upon supports, age group, and number and type of other support staff). The special education teacher's role can include many of the following responsibilities:

- *Monitoring and indirect support*. On a regular, but individually determined basis, special education teachers will directly observe the students on their case load; observe and provide feedback, assistance, and/or training to both professional staff (e.g., music and physical education teachers) and paraprofessional staff who have responsibility for the student with special needs; and indirectly monitor their progress through meetings with the general education teachers serving the student.

- *Individualized instruction that includes or is limited to the student with disabilities*. Sometimes, the student with special needs will receive direct individual instruction in the classroom, while other students do independent, one-to-one, or small-group work.

- *Co-teaching*. Special education teachers may co-teach with general education teachers, taking a small heterogeneous group, a larger group, or an entire class part time as a way of monitoring progress, providing adaptations and direct student support, or facilitating contact with a broader group of students for whom they may provide consultation, including those not identified as having special needs, but who pose certain challenges.

- *Collaboration and consultation*. School planning teams or other curriculum or grade-level planning teams will offer a regular forum for problem solving, while individual student planning teams, established for students with more extensive needs, provide a more intensive medium for cooperating on solutions.

- *Fostering peer support*. Special educators will work directly with typical peers to foster their understanding, support of, and creative problem solving for students with disabilities who are included in their classes (Haring, 1991). Also, special educators will aim for these same goals indirectly by working through the receiving teachers and at times with school counselors, parents, or class volunteers as they foster the support and understanding of typical peers.

Successful strategies range from more formal approaches to very informal discussions with peers and depend primarily on the age of the peers involved. The following are some points to consider in selecting inclusion strategies:

- *Cross-age and peer tutoring* are best when the tutor is in at least third or fourth grade; tutoring encourages helping/teaching relationships rather than friendships.

- *Circle of friends and McGill Action Planning System (MAPS) groups* work best after second grade and encourage students to "get in the shoes" of a peer with disabilities whom they know through shared school contact (Forest & Lusthaus, 1989; Perske, 1988; Stainback, Stainback, & Wilkinson, 1992; Vandercook, York, & Forest, 1989).

- *Peer support groups and networks* (Haring, 1991) consist of students who choose to meet regularly with a faculty facilitator (often the special education teacher or school counselor) because they are interested in being friends with or supporting a member of their class who has disabilities. These groups are similar to MAPS groups, but they may be more flexible in their agenda for problem solving and learning about how to provide support to include their peers with disabilities.

- *Buddy systems or friendship groups,* often formed during the middle school or high school grades, may pair students who have disabilities with peers who are not disabled in a mentoring or "buddy" arrangement and/or encourage the students to gather as small groups for extracurricular activities.

Meaningful Participation

Through collaboration with general educators and others serving a student with disabilities, the special education teacher works to ensure that the student participates meaningfully in integrated activities (Stainback & Stainback, 1992). A variety of approaches contribute to meaningful participation including the following:

- Curricular adaptations that allow students in general education classes to achieve their IEP goals and objectives in one or more of the following ways (Ford, Davern, & Schnorr, 1992; Giangreco & Putnam, 1991):

  (1) Use the same activity and the same objective but a modified method of presentation, practice, and/or evaluation (e.g., use different materials, another response mode such as typing instead of writing, letting the student tell or show you the answer rather than write the answer, etc.). This approach is most often useful with students who have mild disabilities.

  (2) Use the same activity but at multiple levels of difficulty (i.e., multilevel instruction). This means involving some students who are pursuing objectives at different levels but within the same content area (e.g., in math some students work on addition and others work on one-to-one correspondence; during reading some write in their diaries while others select and affix photos to represent their entries). Multilevel instruction can be used for students with mild or severe disabilities.

  (3) Use of the same activity but objectives from different content areas, allowing some students to participate in an activity because it allows them

to learn important social, motor, or communication skills alongside peers who are learning specific course content (e.g., during a science unit on plants, most students learn about leaves and photosynthesis while one student assists the teacher in handing out materials, following directions, and communicating with students by saying their names). This approach has particular relevance to students with severe disabilities.

- For each active IEP objective, teachers use an appropriate approach for gathering student performance information, analyzing progress at least weekly, and making needed instructional modifications.

- Written teaching guides, specifying the steps of an activity and teaching methods in an easy-to-use format, are developed and maintained as determined necessary by the special education teacher and the individual student planning team.

- Teachers keep a current schedule of daily student activities that lists the activity, location, time, sequence, and staff responsible. Students are taught to use personalized schedules that are individualized for their understanding and use.

- A variety of noncompetitive and cooperative grouping options are used that teach interdependence and cooperation (e.g., cooperative learning groups and peer or cross-age tutoring).

Inclusion Across Different Age Groups

Preschoolers. Special education programs reach age groups that are both younger and older than typical students enrolled in general education. This means that schools must reconsider the location of such programs so a broader age range of typical students is available than currently exists in public schools.

Several models for providing special education to preschoolers with identified disabilities or developmental delays may be used in one community. For example, the school system may

- Provide special education services to identified children who are enrolled in private preschools using itinerant teachers and related services staff (Thompson et al., 1991).

- Create publicly or privately funded preschool programs that serve heterogeneous groups of children, some of whom have identified disabilities (Peck, Hayden, Wandschneider, Peterson, & Richarz, 1989).

- Combine special education preschool programs with Head Start programs and with existing child care programs in high school vocational programs -- without

violating the principle of natural proportions (the maintenance of expected numbers of students with disabilities rather than more or fewer than naturally exist in communities).

- Expand the provision of special education services to homes and day care locations for the younger preschoolers, while encouraging part- or full-time enrollment in integrated preschools when preschoolers turn 3 or 4 years of age (Bailey & Winton, 1989).

Each of these models is already in place in various school districts in Virginia (Aveno, 1990; J. Harvey, personal communication, March 27, 1992). The more diverse the community, the more likely it will be that all of these preschool options will be needed.

Post-High-School-Age Students. For students who continue in special education after age 18, schools must identify an educational location where members of the same peer group who are not disabled are engaged in education or vocational training. Retaining students aged 18 to 21 in high schools is age inappropriate. Students who participate in post-high-school special education programs typically have extensive support needs. They have finished high school programs and participated in graduation ceremonies, but probably did not complete graduation requirements. Depending upon their individualized transition plans (ITPs), these students would receive special education during their last 3 to 4 years of school (ages 18 through 21 years) through an individualized approach with somewhat flexible characteristics such as the following (Sailor, Anderson, Halvorsen, Doering, Filler, & Goetz, 1989; Snell, Moon, & Talarico, 1988):

- The major thrusts for instruction would be toward obtaining and holding a community job, typically by using a supported employment approach, using the community, and maintaining and/or expanding a base of peer support.

- The home base location for individuals receiving post-high-school special education might be on the campus of a community college or university or at a vocational setting where peers who do not have disabilities receive job instruction (e.g., a food services department in a hospital or university, telephone company, etc., but not a sheltered workshop or activity center).

- Having a home base location should not mean that the program becomes self-contained; very little, if any, of the students' day would be spent clustered as a group with fellow students who have disabilities in the post-high-school program.

- Most post-high-school students would spend the majority of their day in individual job instruction or intern settings.

- Most post-high-school students also would have individually determined community schedules consisting of leisure activities, volunteer service provision, time with peers, and instruction on using their community facilities.

- Adult service agencies (e.g., vocational rehabilitation or an agency providing supported employment services, a community services board, etc.) -- naturally a part of the ITP team -- would play a central role during this program to facilitate the transition for each student following his or her 21st year.

Community-Based Instructional Programs

For adolescents and adults with moderate to severe disabilities, the practice of teaching functional skills outside the classroom in the school community or the nearby community is supported on a widespread basis (Sailor et al., 1989). The purpose of community-based programs for these students is to facilitate skill generalization to actual home and community settings. Since poor transfer of skills from one set of conditions to another is well documented among students with more extensive cognitive disabilities, simulation of community conditions at school is not typically effective. Community-based instruction should have the following characteristics:

- Instructional groups are small, with no more than three students.

- The skills taught are identified for each student using an informal ecological inventory process. Teachers survey students' families; students themselves when possible; and probable future school, community, and work settings to identify priority activities and skills that are individually functional.

- The skills taught are age appropriate for each student.

- The frequency of instruction in the community increases with age (two to four times per month for grades four and five; two times per week in middle school; three times per week in high school; and most or all of each school day for post-high-school students).

- Program development involves careful planning with school, parents, and community along with ongoing monitoring of the community settings chosen, schedules, transportation, safety, supervision and instruction, and outcomes.

- The skills taught include community use (e.g., shopping, restaurant use, making and keeping medical appointments, street crossing, bus riding); domestic skills (e.g., learning to clean, prepare meals, etc. using a home in the community); leisure and recreation skills (e.g., using the library, the "Y," and local parks); and vocational skills (e.g., getting to and from work, learning several jobs).

Although community-based instruction removes students from classrooms and their typical peers, it appears to be essential in enabling older students with extensive cognitive disabilities to acquire functional skills. Many also have suggested that community-based instructional programs are appropriate for a broader range of students than simply those with extensive cognitive disabilities. Such programs can be broadened to include other students, with and without identified disabilities, who would benefit from the opportunity to directly apply the skills they are learning in school. Broadening community-based instruction to include both nonvocational skills and students who are not disabled would enrich instruction for many students. Not only could adding students who are at risk of failing to graduate improve their schooling, it could also serve to integrate existing community-based instruction by including students who do not have disabilities.

Integration of Related Services

When most therapy or specialized services (e.g., speech and communication therapy, occupational therapy, physical therapy, and adaptive physical education) are provided in the context of ongoing school activities rather than being isolated in therapy contexts, students are more likely to generalize their learning to everyday routines and therapists are more likely to address practical problems and solutions. This approach to providing therapy is referred to as *integrated therapy* or therapy integrated into daily routine, and it has some distinct characteristics (Rainforth, York, & Macdonald, 1992; York, Rainforth, & Giangreco, 1990). Infrequently, some therapy is more appropriately given in private settings, when the objectives concern personal management or the individual is self-conscious about the therapy. Integrated therapy has the following characteristics:

- The locations for therapy are school and community settings where students are scheduled to be, not isolated therapy rooms or gymnasiums where only students with disabilities are in attendance.
- Therapy is given in the context of the school and community activities scheduled for the student and/or the class the student is assigned to.
- Therapy techniques are integrated into the student's instructional program, not simply provided in the same setting.
- Therapy objectives in IEPs are not written separately by therapists but are the result of team consensus and are referenced to performance in priority activities and settings.
- Therapists do not simply become consultants to teachers, but maintain direct, "hands on" contact with their students so they can continue to be effective providers of indirect therapy through teaching others.

- Therapists, along with other educational team members, determine which goals of therapy can be met through other adults or peers and which require "hands-on" contact by therapists.

Placement of students in neighborhood schools means that integrated therapy will require improved approaches to service delivery, participation in team meetings, and scheduling of therapy.

5. HOW CAN THE EFFECTS OF INCLUSIVE PROGRAMS BE EVALUATED?

Researchers have evaluated many aspects of inclusion by measuring (a) attitudes toward others with disabilities; (b) social interactions (their number, positive or negative, successful or unsuccessful); (c) academic performance (mastery of specific content, classroom grades, standardized test scores); (d) friendship networks (sociograms, interview, observation); and (e) number of IEP objectives met and quality of IEPs.

Although schools may wish to evaluate in one or more of these ways to monitor the effects of inclusion, the effects actually are much broader. Teachers, other school staff (professional and paraprofessional), administrators, parents, and many members of the community who are not directly involved in schools will experience the effects. How these individuals perceive change is perhaps more important than what actually changes. Instead of formal measures such as questionnaires or structured interviews, "friendly" measures are better ways for schools to judge how inclusion is progressing and its ripple effects, both positive and negative. Such approaches might include the following:

- School planning team members soliciting feedback from school staff not on the team: teachers to teachers, parents to parents, and so on.
- Teachers keeping notes on students' comments and their responses.
- Teachers talking to parents during parent conferences and reporting the range of views voiced during faculty or team meetings.
- Principals keeping notes on parents' and teachers' comments.

When collaborative teams are active and representative, evaluation information is used formatively; teams respond to criticism constructively by examining the facts and making needed improvements. Evaluation of inclusion also should be part of a self-study process in which a school assesses its progress in achieving what its members view as their goals or outcomes consistent with their beliefs about education (Alessi, 1991). For example, follow-up studies of graduates from inclusive programs might focus on the following questions:

- Do typical students have positive attitudes toward persons with disabilities?
- Do students who have received special education
  - (1) Get community jobs and keep them?
  - (2) Get along with co-workers?
  - (3) Attain some degree of self-sufficiency while living in the community?
  - (4) Enjoy adult life (have friends, engage in community leisure activities, etc.)?
  - (5) Successfully pursue higher education or technical education opportunities?
  - (6) Become law-abiding citizens of communities?

SUMMARY

The bottom line for any educational reform is that it contributes to our have occurred overarching goal "to engender and sustain in (all) students a desire to continue individual growth, pursue knowledge, develop aesthetic sensibilities. . .by providing intellectually challenging programs" (Sarason, 1990, p. 156). Within this same context, for any placement to be considered "least restrictive," the placement must provide a reasonable opportunity for meaningful educational benefit to the student, not a step backwards or a place where no learning occurs (Brady, McDougall, & Dennis, 1989). No matter what the actual changes are, educational reform is predictably difficult (Sarason, 1990). However, the changes associated with successful inclusion of students with disabilities

- Can be described and observed in many schools.
- Cannot be prescribed by formula or mandated from above.
- Appear to contribute to other needed changes in schools.
- Foster conditions conducive to growth in all students.
- Foster teacher collaboration and growth.
- Are compatible with the current climate for school reform, restructuring, shared decision making, and valuing diversity of learners.

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APPENDIX A

Videotapes on Inclusion

Videotapes on Inclusion

1. **A New Way of Thinking. Gaus, W. E., Terwilliger, J., & Terwilliger, M. Stay Tuned Production. (1987)**

This video is approximately 20 minutes long and describes successful integration experiences for children and adults (preschool, school-age, transition, and adults).

Total cost: $42.50

Order from: TASH
1121 Greenwood Avenue N.
Seattle, WA 98133
Tel: (206) 361-8870

2. **Regular Lives. Goodwin, T., & Wurzburg, G. Washington, DC, State of the Art Productions. (1988)**

Regular Lives is a 28-minute videotape showing students with disabilities integrated into regular education classrooms in elementary, middle, and high school. It also shows adults with disabilities integrated into the community.

Total cost: $48.45

Order from: PBS Video
1320 Braddock Place
Alexandria, VA 22314
Tel: 1(800)424-7963

3. **The Way to Go. Beckstead, S. P., & Goetz, L. San Francisco: San Francisco State University. (1988)**

This tape is meant to be an awareness-level training tool addressing the inclusion of students with multiple severe disabilities in integrated, community-based instruction. The tape is 20 minutes long.

Total cost: $42.50

Order from: TASH
1121 Greenwood Avenue N.
Seattle, WA 98133
Tel: (206) 361-8870

4. **With a Little Help from My Friends. Forest, M., & de Sousa Valdemar. Vision Video Magic Concepts and Production Ltd. (1988)**

This videotape was produced in Canada and shows students with disabilities attending school in regular education classes. It tells how to form a "circle of friends." The video is divided into three

parts: "The Vision," "Let's Talk," and "May's Map." It includes the reactions of regular education students and staff to integration. The videotape runs approximately 65 minutes.

Total cost: $55.00

Order from: Expectations Unlimited
P.O. Box 655
Niwot, CO 80544

5. **There's Always Belinda. Don Mills, Ontario, Canada: Youth Involvement--Ontario.**

There's Always Belinda is a name given by a group of teens who created an after-school friendship with a 14 year old named Belinda. of Guelph, Ontario.

This videotape addresses the importance of all teens having friends their own age and opportunities to socialize. Teenagers discuss their relationships and involvement with Belinda and the effect their friendship has had on their lives. Having friends has turned Belinda around. The positive changes in Belinda's language, her appearance, and her social calendar are shown.

There's Always Belinda is geared to a young audience: fifth grade to high school. Also, parents and teachers interested in starting friendship circles for youth who are challenged would benefit from viewing. (Available in both English and French.)

Video cost: Purchase $40.00
3-day rental $25.00 (add $10.00 for out-of-town orders)

Order from: Youth Involvement-Ontario
180 Duncan Mill Road, Suite 600
Don Mills, Ontario, Canada M3B126
(519) 843-2197

6. **Hello, My Friends. John Stoddard Publications, Inc. for British Columbia Association on Community Living (Producer) (1990). Vancouver: British Columbia Association for Community Living.**

This 17-minute videotape shows successful integration strategies in the New Ungraded Primary Program in British Columbia, Canada. The tape portrays four children with disabilities and their friends who attend the same primary classroom in the Primary 1 through 3 schools. Curriculum adaptation, collaboration, and peer support are illustrated.

Total cost: $37.30 (U.S. cost per video for groups and professionals; $26.60 for families)

Booklet: Learning Together. Bracewell, D. Vancouver: British Columbia Association for Community Living. (updated)

Also available from BCACL, this 48-page book stands alone or may be used in conjunction with the videotape. The first section charts the last 10 years' progress in integrating children with challenging needs into regular classroom settings; the second section is a collection of stories about children, regardless of ability, learning side by side; the last section offers resources.

Total cost: $52.50 (Payment must be enclosed with orders.)

Order from: BC Association for Community Living (BCACL)
#300-30 East 6th Avenue
Vancouver, BC V5T 4P4
Tel: (604) 875-1119
Fax: (604) 875-6744

Note: Many of these tapes are available through the Technical Assistance Centers serving programs for students with disabilities:

George Mason University (703-993-3665)
Virginia Tech (1-800-848-2714)
Virginia Commonwealth University (804-367-8802)

APPENDIX B

Materials from the Virginia Statewide Systems Change Project
1987-1992

Materials from the Virginia Statewide Systems Change Project
1987-1992

1. Disability Awareness Manual.
   This manual provides a practical guide for educators to use in conducting disability awareness training for nondisabled students in integrated school sites. It provides both background information and sample training activities.

2. Integration of Students with Severe Disabilities into Regular Schools.
   This program packet provides administrators, teachers, and parents with general information about the "why's" and "how's" of integrating students with severe disabilities into regular education schools. The rationale for integration is discussed, and concepts such as integration, mainstreaming, and home schools are described. Typical questions about integration are also answered.

3. Facilitating Social Interactions Between Persons with Severe Disabilities and their Nondisabled Peers in School and Community Settings.
   This program packet provides in-depth information about how to ensure that students with severe disabilities are not only physically integrated, but also socially integrated with their nondisabled peers.

4. Design, Delivery, and Monitoring of Effective Instructional Programs for Learners with Disabilities.
   This program packet provides a variety of practical suggestions and illustrations of procedures for designing individualized instructional programs for learners with severe disabilities. Guidelines for instructional procedures, data collection, and the use of data to improve instruction are included.

5. Community-Based Instruction in Integrated School Programs for Students with Moderate or Severe Disabilities.
   Suggestions for effective design and implementation of community-based instructional activities are provided in this program packet. Sample instructional programs are also included.

6. Moving from Segregated to Integrated Special Education: A System Change Process for Local Education Agencies.
   This manual outlines a process for planning and implementing local efforts to change from a segregated to an integrated model of special education service delivery.

7. Helping Local School Systems to Integrate Learners with Severe Disabilities: A Manual for Technical Assistance Providers.
   This manual is intended for use by statewide systems change projects or other technical assistance organizations that are assisting local education agencies with their integration and program improvement efforts. It outlines the technical assistance model implemented by The Virginia Statewide Systems Change Project and includes copies of planning and evaluation documents.

8. On Common Ground (videotape).
   This videotape includes interviews with special and regular education administrators and teachers in several school divisions in Virginia and shows students with moderate and severe disabilities involved in a variety of integrated school and community learning activities. It is designed primarily as an awareness-level training tool.

9. Best Practice Guidelines for Students with Severe Disabilities (brochure).

10. Exemplary Site Brochure.

These materials are available at no charge or for a nominal charge to cover copying and postage. For more information or to place an order, please contact

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